

SERIAL NUMBER <div style="text-align: center;">09/293,297</div>	FILING DATE <div style="text-align: center;">04/16/99</div>	CLASS <div style="text-align: center;">370</div>	GROUP ART UNIT <div style="text-align: center;">2731</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">1400.9801200</div>
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APPLICANT

SHAWN P. MCALLISTER, MANOTICK, CANADA; ANDREW DOLGANOW, OTTAWA, CANADA.

****CONTINUING DOMESTIC DATA*******
 VERIFIED

None DD

****371 (NAT'L STAGE) DATA*******
 VERIFIED

None DD

****FOREIGN APPLICATIONS*******
 VERIFIED

None DD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/07/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no </div> <div> <input type="checkbox"/> Met after Allowance </div> </div>	STATE OR COUNTRY <div style="text-align: center;">CAX</div>	SHEETS DRAWING <div style="text-align: center;">4</div>	TOTAL CLAIMS <div style="text-align: center;">33</div>	INDEPENDENT CLAIMS <div style="text-align: center;">4</div>
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ADDRESS

MARKISON & RECKAMP PC
 175 WEST JACKSON BOULEVARD
 SUITE 1015
 CHICAGO IL 60604

TITLE

METHOD AND APPARATUS FOR SUPPORTING CONNECTION TYPE PARTITIONING IN A COMMUNICATIONS NETWORK

FILING FEE RECEIVED <div style="text-align: center;">\$1,072</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div>
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